

APPLICATION FOR DIRECTOR OF THE STATE OF ALABAMA ETHICS COMMISSION

GENERAL INFORMATION

Full Name: _____
First Middle Last

Mailing Address: _____
House or Apartment Number Street

City State Zip Code

Telephone Number: Home (____) _____ Cell (____) _____ Work (____) _____

Email Address: _____

The following optional information is for governmental reporting purposes only:

Date of Birth: _____ **Sex (check one):** Male (____) Female (____)

Race (check one): 1. White (____) 2. Black (____) 3. Hispanic (____) 4. Asian or Pacific Islander (____)
5. American Indian or Alaska Native (____) 6. Other (____)

EDUCATION

PROVIDE INFORMATION ON ALL SCHOOLS ATTENDED. SPECIFY UNDERGRADUATE OR GRADUATE WORK.

Name and Location of School	Dates of Attendance (Month/Year)		Did you Graduate?		Type of Degree and Date
	From	To	Yes	No	
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

PROFESSIONAL LICENSE

License/Certificate Issued By	Field/Trade/Specialization	License/Certificate No.	Issue Date	Expiration Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

CURRENT EMPLOYMENT

Current Job Title: _____

Current Employer: _____

Name & Title of Supervisor: _____

Telephone Number & Email of Supervisor: (____) _____
Number Email

Address of Employer: _____
Street Address

City State Zip Code

Dates of Employment: _____ **Current Salary:** _____

IMMEDIATE PAST EMPLOYMENT

Job Title: _____

Employer: _____

Name & Title of Supervisor: _____

Telephone Number & Email of Supervisor: (____) _____
Number Email

Address of Employer: _____
Street Address

City State Zip Code

Dates of Employment: _____ **Ending Salary:** _____

Reason for Leaving: _____

CRIMINAL HISTORY

Have you ever been convicted of a misdemeanor or felony crime? (Including pleading guilty or nolo contendere.) () Yes () No

If you answered Yes to the above question, list in the space below all prior misdemeanor and felony convictions and any extenuating or mitigating circumstances regarding such convictions. If necessary, you may use a separate sheet or sheets and attach to the application. _____

NOTE: A CRIMINAL CONVICTION WILL NOT NECESSARILY BE A BAR TO CONSIDERATION FOR EMPLOYMENT. THE DISCLOSURE OF A MISDEMEANOR CONVICTION WILL NOT AUTOMATICALLY RESULT IN DISQUALIFICATION. CRIMINAL HISTORIES WILL BE SUBMITTED TO THE NATIONAL CRIME INFORMATION CENTER (NCIC) FOR VERIFICATION. FAILURE TO DISCLOSE A CONVICTION MAY BE CONSIDERED AS GROUNDS FOR DISQUALIFICATION. FOR THESE REASONS, APPLICANTS SHOULD BE CAREFUL TO DISCLOSE ALL CRIMINAL CONVICTIONS.

AUTHORIZATION AND ACKNOWLEDGMENTS

1. I hereby certify, under penalty of perjury, that all statements on or attached to this application are true, correct, and complete. I understand that all information on this application is subject to verification, and I consent to criminal history background and employment checks. I agree to allow the Alabama Ethics Commission to receive a copy of my Alabama Background check. If employed, I agree to electronic deposits of my payroll check and other state payments.
2. I understand and agree that this form is to be used for application for the Director of the State of Alabama Ethics Commission vacancy as specifically stated in the published announcement. This application will be considered exclusively for the announced current opening and for no other position or future job opening.
3. I understand and agree that, if selected as a finalist, I will furnish official college transcripts.
4. I grant permission to the State of Alabama Ethics Commission, if selected as a finalist, to contact supervisors or references concerning my current or previous employment and any other pertinent information the supervisors or references might have, personal or otherwise, excluding any medical or health information precluded from disclosure or consideration under federal law or state law. I release all parties from all liability for any damage that may result from furnishing this information to you.
5. I understand that, if hired, I serve at the pleasure of the State of Alabama Ethics Commission.
6. I understand that a complete application packet consists of this Application for Director of the State of Alabama Ethics Commission; a cover letter relating to my experience as outlined in the vacancy announcement; a current resume not to exceed two (2) pages; and the names and contact information (including telephone numbers) of three references.
7. All applications will be treated as confidential until a final list of "best-qualified" candidates is established.

By signing below, I verify that I have read and understand all of the above statements.

Signature: _____ **Date:** _____

SUBMIT APPLICATION PACKETS TO:

Director of Alabama Ethics Commission Selection Committee
PO Box 5037
Montgomery, Alabama 36111
or
personnel@personnel.alabama.gov

The State of Alabama and the Alabama Ethics Commission are Equal Opportunity Employers